



Arkansas Department of Human Services

Division of Medical Services

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TO: Arkansas Medicaid Living Choices Assisted Living Providers

DATE: January 1, 2005

SUBJECT: Proposed - Provider Manual Update Transmittal No. 5

REMOVE

Section	Date
212.700	10-13-03

INSERT

Section	Date
212.700	1-1-05

Explanation of Updates

Section 212.700 has been revised to indicate that prior authorization is not required—for dates of service on and after January 1, 2005—for the 7th, 8th and 9th prescriptions per month for participants in the Living Choices Assisted Living Program.

Paper versions of this update transmittal have updated pages attached to file in your provider manual. See Section I for instructions on updating the paper version of the manual. For electronic versions, these changes will be automatically incorporated.

Thank you for your participation in the Arkansas Medicaid Program.

Roy Jeffus, Director

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at (501) 682-6789 or 1-877-708-8191. Both telephone numbers are voice and TDD.

If you have questions regarding this transmittal, please contact the EDS Provider Assistance Center at 1-800-457-4454 (Toll-Free) within Arkansas or locally and Out-of-State at (501) 376-2211.

Arkansas Medicaid provider manuals (including update transmittals), official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.

212.700 Extended Prescription Drug Benefit**1-1-05**

Individuals participating in the Living Choices Assisted Living waiver program are eligible for up to 9 medically necessary prescriptions per month. For dates of service before January 1, 2005, prior authorization is required for the 7th, 8th and 9th prescriptions in a month.